SHEET 1 OF 1

Substitute for form 1449A/PTO

INFORMATION DISCLOSURE' STATEMENT BY APPLICANT

ATTORNEY'S DKT NO.	APPLICATION NO.		
019219-013	09/937,326		
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SCA Hygiene Products Zeist B	s.V. et al		
FILING DATE	GROUP		
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			U.S. PATENT DOCUMENTS				
	U.S. Patent D	ocument					
Examiner Initials	Number	Kind Code (if known)	Name of Patentee or Applicant of Cited Document		Date of Publication (MM-DD-YYYY)		
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		F	OREIGN PATENT DOCUMENT	s			
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			PATENT LITERATURE DOCUM				
Examiner	Include	name of autho	r (in CAPITAL LETTERS), title of the rnal, serial, symposium, catalog, etc.	article (whe	en appropriate), title of le(s), volume-issue num	the iber(s).	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231.